

EAST SUFFOLK COUNTY EDUCATION  
COMMITTEE



ANNUAL REPORT  
OF THE  
**Principal School Medical Officer**

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Health Department,  
County Hall,  
Ipswich.

June, 1964.

To The Chairman and Members  
of the Education Committee.

My Lords, Ladies and Gentlemen,

I have pleasure in presenting my 12th Annual Report as Principal School Medical Officer on the work undertaken by the School Health Service in 1963, the 55th in the series.

At the outset I should like to take this opportunity of welcoming Dr. Joyce Board to the Department on her appointment in September as Senior Medical Officer, from Nottinghamshire County Council Health Department.

Once again this year certain staffing difficulties have occurred in relation to school medical officers and speech therapists. For some years the number of speech therapists has fluctuated from the equivalent of 1.4 whole-time therapists to 2.4, but at no time has it been possible to obtain a full complement. At the end of the year one full-time and one part-time therapist only were in post. As a result only a small proportion of children in need of therapy have received treatment despite the endeavours of the staff to ensure that a maximum number of children received some benefit, if not the ideal arrangement, by enlisting the aid of teachers whose help is gratefully acknowledged.

Due to the extended demands on the time of school medical officers for specialised examinations of school and pre-school children handicapped to a lesser or greater degree and a reduction in the number of available part-time medical officers, our target of two periodic medical examinations a year has not been fulfilled. In fact, only 87 schools were visited on the recognised two occasions in the year, the remaining 114 schools on one occasion only.

There is no need for me to add to what Mr. Macpherson, Principal School Dental Officer, has said about the School Dental Service, except perhaps to again make brief reference to the discussion and publicity which ensued about the fluoridation of public water supplies.

Research in America, Canada and the United Kingdom has indicated that in areas where the natural fluoride content of water supplies approximates to one part per million, the teeth of the inhabitants have been healthier than where the content is lower. These conclusions were confirmed by a small sample survey conducted in this County amongst school-children living in low and high fluoride areas. Generally speaking water supplies in the West of Suffolk have a much higher fluoride content than those in the East.

I would, however, like to make special reference to the report by Mr. Green, Teacher for the Deaf, on "Training the young child with impaired hearing to listen". The greater the publicity given to this subject the less will be the likelihood of any child entering school with a severe speech defect due to the inability to hear adequately.

The general physical condition of children examined still remains satisfactory at 99.81%, and those found to have defects requiring treatment amounted to 12.4% of those examined, which compares favourably with the national average in England and Wales recorded in 1961 at 15.51%.

In conclusion, I should like to once again express my appreciation of the support and encouragement given to me by the Chairman and Members of the Education Committee and School Welfare Sub-Committee, the willing assistance and co-operation of the Chief Education Officer, his staff and teachers, added to the enthusiasm and loyalty of the staff of my own Department.

I have the honour to be,

Your obedient servant,

S. T. G. GRAY,

Principal School Medical Officer.

SCHOOL HEALTH SERVICE

1. (a) Staff.

Principal School Medical Officer:

S.T.G. Gray, M.B., Ch.B., D.P.H.

Senior Medical Officer:

Joyce O.M. Board, M.B., B.S., D.C.H. (16.9.63).

School Medical Officers:

Margaret E. Bradley, M.R.C.S., L.R.C.P., D.A.

Kathleen M. Harding, M.D., D.P.H.

C.H. Imrie, T.D., Q.H.S., M.B., Ch.B., D.P.H.

H.E. Nutten, M.B., Ch.B., D.P.H.

Margaret A. Riddell, M.B., B.S., (part-time) (13.11.63).

H.J. Royall, M.B., Ch.B.

Isabella Sim, M.B., Ch.B., D.P.H. (part-time)

The aggregate of time given to School Health Service work is equivalent to the services of 3.9 full-time Officers.

Speech Therapists:

Mrs.E.A.Smyth, L.C.S.T.

Mrs.J.M.Lang, L.C.S.T. (part-time)

Mrs.J.Easdown, L.C.S.T. (to 30.6.63)

Principal School Dental Officer:

C.D. Macpherson, L.D.S., R.C.S.

School Dental Officers:

J.E.Benfield, L.D.S.

J.F.Goldsworthy, L.D.S., R.C.S.

F.W.Walmsley, L.D.S., R.C.S.

A.L. Whitaker, L.D.S., (part-time)

County Nursing Officer:

Miss M.Vaughan-Jones, S.R.N., S.C.M., H.V.Cert.

Deputy County Nursing Officer:

Miss M.Jarrett, S.R.N., S.C.M., H.V.Cert.

Area Nursing Officer:

Miss H.Place, S.R.N., S.C.M., H.V.Cert.

School Nurses: Miss I.Bays, Miss B.C.Broughton, Mrs.S.F.Butler, Miss J.P.Cosnett (to 30.11.63) Miss W.M.Deakin, Miss P.Dennis, Miss B.L.Frost, Miss S.M.Green, Miss L.Luff, Miss M.Naylor, Miss R.G.H. Payne (to 31.3.63) Miss A.Rooney, Miss M.Scott (part-time) (to 30.6.63) Miss K.Smith, Miss H.D.Williams (1.1.63) Miss S.J.Williams, Miss M.K.Wood, Mrs.J.M.Walker (17.7.63) Miss M.Wyatt.



The aggregate of time given to School Health Service work is equivalent to the services of 3.7 full-time School Nurses.

Clerk/Attendant Audiometrians:

Mrs. E. I. Lines (10.6.63)  
Mrs. J. S. Turner (24.6.63)

Clerk Attendant:

Mrs. P. M. Masterson

Dental Surgery Assistants:

Mrs. C. M. Barnes  
Mrs. P. M. Brown (4.11.63)  
Mrs. A. Clover (29.4.63 to 2.11.63)  
Mrs. M. Hales (to 8.4.63)  
Mrs. F. E. Quick  
Miss M. E. Stannard  
Mrs. H. Warner

1. (b) School Clinics

The following are the permanent clinics in the Education Authority's area:-

County Area:

<u>Place</u>	<u>Address</u>	<u>Services Provided</u>
Beccles	Crowfoot School	Speech Therapy Dental
Felixstowe	Trinity Methodist Church Hall	Speech Therapy
Ipswich	The County Hall	Dental (Orthodontic) by appointment only.
Leiston	The County Health Clinic, "Daneway", Haylings Road.	Dental
Saxmundham	The County Health Clinic,	Chest Clinic (by Regional Hospital Board). Child Psychiatry (by Regional Hospital Board). Ophthalmic (by Regional Hospital Board).
Stowmarket	The County Health Clinic, 8, Violet Hill	Chest Clinic (by Regional Hospital Board). Dental Speech Therapy Ophthalmic (by Regional Hospital Board).

Lowestoft Excepted District:

Clapham Road  
Kirkley Clinic, South-  
well Road

Dental  
Speech Therapy  
Minor ailments.  
Speech Therapy  
) Minor ailments  
) Dental

<u>Place</u>	<u>Address</u>	<u>Services Provided by</u>
	"Penrhyn", Regent Road	Ophthalmic (by Regional Hospital Board). Child Psychiatry (by Re- gional Hospital Board).

2. Co-operation with other Public Health Services — As during last year liaison between all concerned with the health of the school child has been satisfactory.

### PRIMARY, MODERN AND GRAMMAR SCHOOLS

3. Hygiene and Sanitation in Schools — During the last twelve months, a certain amount of improvement work has been possible, and 34 schools have benefited as follows:-

	<u>No. of schools</u>
Conversions from Elsan closets to Water Closets ... ..	11
New or additional Water Closets ... ..	7
New cesspool ... ..	1
Hot water supply to wash basins ... ..	15

4. Medical Inspection in Schools — The area of the administrative County for school purposes, excluding the Borough of Lowestoft, is 543,812 acres, with a population of 179,684 (1961), 202 schools in the County are under the control of the Education Committee (171 Primary, 21 Modern, 2 Area, 7 Grammar and Ashley Downs E.S.N. Special School, Lowestoft).

#### East Suffolk (excluding Lowestoft)

Year	Total Number of Pupils	Number of Pupils at Grammar Schools
1959	24,016	2,420
1960	23,602	2,358
1961	23,908	2,346
1962	23,756	2,332
1963	24,260	2,323

Inspections — The following examinations were made during the year:-

Periodic Inspections ... ..	7,026
Re-inspections ... ..	4,339
Special Inspections ... ..	69
Total ... ..	<u>11,434</u>



5. Findings of Medical Inspection

(a)

Year	Number of Pupils Inspected	PHYSICAL CONDITION			
		Satisfactory		Unsatisfactory	
		Number	Per-centage	Number	Per-centage
1959	5,739	5,674	98.87	65	1.13
1960	8,720	8,650	99.20	70	.80
1961	6,631	6,584	99.29	47	.71
1962	7,856	7,786	99.11	70	.89
1963	7,026	7,017	99.87	9	.13

(b) Uncleanliness

Vermin Tables — School Health Visitors Examinations

Y E A R	No. of visits to		Number of Examinations			Number of Children found verminous					
						New Cases, for first time.			Individual Repeat Cases		
	Schools	Homes	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total
1959	620	66	25,585	23,847	49,432	12	47	59	6	17	23
1960	89	49	2,853	3,422	6,275	17	27	44	6	14	20
1961	58	52	2,585	2,811	5,396	9	25	34	6	12	18
1962	40	48	2,695	2,671	5,366	6	23	29	5	17	22
1963	36	26	1,735	1,844	3,579	7	17	24	2	3	5

Uncleanliness examinations were confined to the follow up of the hard core of cases known to be infested from time to time and visits by Health Visitors to schools at the specific request of a head teacher or parent.

(c) Ringworm of the Scalp — one case of ringworm of the scalp was diagnosed or treated through the School Health Service during 1963.

(d) Visual Defects and External Eye Diseases.

Year			Defective Vision	
			Referred for Treatment	Observation Cases
1959	...	...	185	725
1960	...	...	278	1,102
1961	...	...	263	459
1962	...	...	208	732
1963	...	...	663	817

Year			External Eye Disease	
			Referred for Treatment	Observation Cases
1959	...	...	8	52
1960	...	...	8	49
1961	...	...	4	31
1962	...	...	-	28
1963	...	...	6	17

(e) Nose and Throat Defects

Year			Tonsils and Adenoids	
			Referred for Treatment	Observation Cases
1959	...	...	43	337
1960	...	...	15	477
1961	...	...	25	239
1962	...	...	17	324
1963	...	...	45	126

(f) Impaired hearing — Routine screening tests were carried out in respect of 9,153 children of whom 1,118 failed. Full audiometric hearing tests were ultimately undertaken in 215 of these cases. Of these 122 were found to have a hearing loss and arrangements were made for referral to E.N.T. consultants for treatment as necessary and the provision of a hearing aid where appropriate. In the majority of cases however Head Teachers were asked to arrange for the children to be given advantageous positions in class and the Peripatetic Teacher for the Deaf advised.

Training the Young Deaf Child to Listen

I am indebted to Mr. Green, the Peripatetic Teacher for the Deaf for the following report:-

"At the outset it must be emphasised that some residual capacity to hear is latent, if not apparent, in the majority of deaf children. Auditory training is begun for babies under the age of twelve months, who when first tested appear to be very deaf, by the mother who, when nursing the child, talks and sings into his ear. This kind of training should be given several times a day for short periods of two or three minutes each and always as part of the day's routine, as for instance before being put into bed or before the day-time rest. At other times, when the child is awake in his cot, pram or play-pen, the child should be encouraged to watch speech.

Recent experience with young deaf children has not confirmed the appearance of fear or dislike of an amplified voice noted in young deaf children by workers in some audiological clinics. Listening to mothers

speech through a hearing aid, within the setting of the child's own home environment has invariably produced reactions of interest and amusement in the children. In such cases regular listening practice with an aid can, and should, be given as soon as practicable if the advantage gained by the early detection of these children, by health visitors using screening techniques, is not to be lost.

The words and phrases used in giving auditory training and training in lipreading should be those which would be used to any ordinary child in the course of normal daily routine. Normal intonation should be used throughout since this is usually the first characteristic of speech to arouse a baby's attention. It is vitally important that this training should take place in direct association with real-life, day-to-day situations as they occur in the home. The young child should be encouraged to listen to and to watch a speaker's words when comments on different situations and activities are being spoken. Formal lessons in listening or lipreading should not be attempted at this stage.

Apart from speech sounds, these young children must be allowed to experience the sounds and noises made by their toys and immediate surroundings, e.g. the shaking of a rattle, the slam of the door, the scrape of a chair, the blowing of whistles and trumpets and the beating of drums, chime bars or even wooden chair bottoms. The association of movement with sound, which he can see, feel and hear is an essential feature of this early stage of auditory training.

Babbling and other pleasant vocalisations should be encouraged at all times, even in bed. Many young children, deaf as well as the hard of hearing, love to 'talk' to their dolls or teddy bears and a private language of apparent jargon is a perfectly normal precursor of intelligible speech. A normal infant has ten to twelve months unimpaired auditory training before he attempts his first word. Much of this time is spent in passive listening, in associating sound with its source and later, its meaning. The young deaf child too, needs hundreds of repetitions of sounds and words before these become meaningful to him. This auditory saturation of a few sounds, words and phrases is a slow, often disheartening task with apparently little to show in the way of results. Parents of young deaf children and many teachers in nursery schools and classes for deaf children may tend to give up, thinking that the child is too deaf to benefit from auditory training, when all too frequently this is not so. The presentation of too many differing sounds at this stage can lead to bewilderment and withdrawal in the child. Word vocabularies are best built up very gradually on the foundation of the preceding sound listening experience.

Babbling and jargon are the child's first steps in speech imitation and are usually followed by an echolalic phase which often disturbs parents and teachers. This practice in basic phonic ability opens the door for the beginnings of formal speech training and is an essential stage in speech development. All children then pass through an ego-centric era characterised by continuous monologues accompanying whatever activity the child may be engaged upon. However faulty this speech, this talking to himself should be encouraged. Many speech faults will be noticed and should be practiced and improved during



quieter periods of the day, many faults will tend to be rectified by the child as he gains fluency in listening and speaking.

During the first few years then, the deaf child's language training must be both casual and specific. Casual in that the child should be brought up in a speech atmosphere, whether he responds to speech or not. Specific in that the child should be given definite encouragement and training in lipreading, breath control, in listening, and in watching and feeling for all the vibrations that speech and sounds make. This multisense approach to speech is essential for success and should be employed immediately the child is ready for it, or for any part of it. Seeing and feeling can commence right from the earliest days, followed later by developing the approach by hearing. No matter how little hearing the child may have, it is too precious not to be used and trained."

#### 6. Follow Up Visits

During the year School Health Visitors made 664 visits to the homes of children in need of medical and surgical treatment to ensure that the parents consulted the family doctor and carried out any recommendations made.

#### 7. Medical Treatment

(a) Minor Ailments and Diseases of the Skin — Apart from Lowestoft Borough there are no Minor Ailment Clinics in the County, and children suffering from these conditions were referred to their private Medical Practitioner when treatment was required.

(b) Visual Defects and External Eye Diseases:- This work is carried out through the Supplementary Ophthalmic Services provided under the National Health Service Act, 1946, supplemented by the Regional Hospital Board, who have 3 ophthalmic clinics in the County, 2 in the Committee's clinic premises at Saxmundham and Stowmarket and 1 in hospital premises at Felixstowe. Information obtained by follow-up home visits shows that of 91 children whose sight was tested by ophthalmic medical practitioners or ophthalmic opticians, 68 were prescribed glasses. In 20 cases glasses were found to be unnecessary at present and in 3 cases another form of treatment was prescribed.

#### (c) Nose and Throat Defects

##### Tonsils and Adenoids:

Since all children who are considered by the School Medical Officers at periodic medical inspections to require treatment for nose and throat defects are now referred to their own doctors, it is not possible to provide any accurate statistics. Information so far obtained by follow-up home visits and from hospital reports shows that 395 children have received operative treatment, while 2 were not considered to require it at present.

#### Other Conditions:

Four children were referred for treatment for various nasal conditions and, as far as can be ascertained, have been treated.

#### (d) Dental Inspection and Treatment

The Principal School Dental Officer, Mr.C.D. Macpherson, reports as follows:-

The long spell of unusually severe weather during January and February was an impediment to those officers who were working in the Mobile Surgeries. For some weeks the intensity of the frost was unremitting through night and day so that it was impossible to use the internal water circuits — occasionally the waste pipe froze even when in use. All water was carried from the schools, as required, and I thank the dental attendants who, without complaint, acted as water-carriers under most unpleasant conditions. Incidentally, the lowest internal temperature I recorded, on arrival, was 22° F and on that day the condensation was freezing on the floor throughout the morning.

In May, a small survey was carried out to discover whether the incidence of dental decay varied according to the natural fluoride content in the public water supplies. It was found that there was a great reduction in decay where the fluoride content was close to the optimum of 1 part per million. Also, the number of caries free mouths was more than doubled in the higher fluoride areas compared with the caries free mouths in the lower fluoride areas. It should be appreciated that the conclusions derived from this sample survey are factual: thus the actual oral condition of these Suffolk school-children is not affected in any way by the storm which rages over the adjustment of fluoride content of public water supplies. By mere incident of geographical situation some children suffer — and continue to suffer — more dental decay than other children in our County.

Over 2,000 more inspections have been carried out during the year than in 1962 and it should be appreciated that, because of additional information given to parents on the consent forms, inspections are more time-consuming than formerly. This is because a more detailed assessment is required to indicate to the parent the categories of proposed treatment.

A favourable and heartening trend is shown by the increase in the number of permanent teeth conserved coincident with the decrease of permanent teeth extracted.

Dental Health Education material has been given to schools and individual leaflets on the care of teeth have been given to children. Class talks and demonstrations have been given to schools at the request of teachers. I am grateful to the many teachers who have shown a keen interest in Dental Health measures — one facet of their care for the well-being of the children in their charge.



(e) Child Guidance:

The Ipswich Group Hospital Management Committee's Consultant Psychiatrist, Dr.J.G. Howells and the Little Plumstead Hospital Management Committee's Consultant Psychiatrist, Dr. J. V. Morris, have kindly submitted the following statistical summary of the work carried out during the year in respect of children residing in the Committee's area:—

New children for East Suffolk from 0-5	...	49
New children for East Suffolk from 5-15	...	90
Referred by G.P's	... ..	123
Referred by S.M.O's	... ..	16
Clinic interviews for the year	... ..	2,902
School visits	... ..	29
Home visits	... ..	208
No. of children attending on 1st January, 1963		48
No. of children attending on 31st December, 1963		170
Total No. of school children who received treatment during the year, whether commenced in 1963 or previously	...	183

(f) Speech Therapy:

The provision of speech therapy in the Leiston, Halesworth, Southwold and Woodbridge areas mentioned in last year's report was short-lived with the resignation in June of Mrs. Easdown for domestic reasons. This vacancy had not been filled by the end of the year.

Mrs. E.A. Smyth continued with her clinics in the South and reports as follows:-

"Owing to the increasing demand for the Speech Therapy Service, it was found necessary to introduce the fortnightly system of School visits over a wider area. The teachers have co-operated splendidly, carrying out articulation practice and exercises prescribed by the therapist, during the periods between visits, often with entire classes who have benefited accordingly.

Owing to the interest and co-operation of the teachers, the fortnightly Speech Therapy Clinics have proved successful, and a far greater number of cases have had the advantage of treatment.

The Centralised Clinics at Stowmarket and Felixstowe have been carried on as before where children have been seen weekly.

22 Schools have been visited where the therapist has held fortnightly clinics, and 3 schools have been visited weekly.

In all, the Speech Therapist has treated 130 cases, classified as follows:-

Retarded speech development	...	...	5
Emotionally maladjusted	...	...	1
Stammerers	...	...	18
Excessive nasality	...	...	1
Expressive aphasia	...	...	1
Sigmatism	...	...	12
Hard of hearing	...	...	2
Dyslalia	...	...	90 "

Mrs. J. M. Lang who is employed in a part-time capacity and works in the north of the county reports as follows:-

"Having completed visiting all the schools in my area and re-visited 37 of them during the last year, some more than once, depending on the need, I have been very satisfied with the progress made by the children concerned. In fact, the teachers have secured some complete cures owing to the work they have put in.

I regularly visit and treat at four schools, holding clinics there. I also have a clinic fortnightly at Beccles where 16 cases are attending, three more having been taken off the waiting list recently.

Over the year I have travelled over 3,800 miles, taking on 57 new cases and discharging 30, of whom 12 were cured.

Of the types of case at present on my list, there are:-

Dyslalia	...	...	...	201
Stammer	...	...	...	12
Sigmatism	...	...	...	10
Emotional Causes	...	...	...	2
Cleft or weak palate	...	...	...	3
Dysphasia	...	...	...	2
Hearing loss	...	...	...	3
Delayed speech	...	...	...	5
Spastic	...	...	...	1

(g) Immunisation and Vaccination:

During the year 5 pupils who had not previously been treated were immunised against diphtheria and 1,295 received reinforcing doses.

Through arrangements made by the Education Committee with the Ipswich Group Hospital Management Committee's Consultant Chest Physician, 1,483 school pupils were given B.C.G. vaccination against tuberculosis.

The arrangements for school children to be vaccinated against poliomyelitis continued during the year.

# 8. Infectious and Contagious Diseases

The table below shows the number of children known to have been excluded from school, either suffering from, or being contacts of the infectious and contagious diseases named.

					<u>No. of cases</u>
Measles	...	...	...	...	902
Chicken Pox	...	...	...	...	700
Mumps	...	...	...	...	444
Scarlet Fever	...	...	...	...	81
German Measles	...	...	...	...	62
Whooping Cough	...	...	...	...	37
Tonsillitis	...	...	...	...	25
Dysentery	...	...	...	...	21
Impetigo	...	...	...	...	15
Influenza	...	...	...	...	11
Eye infections	...	...	...	...	10
Ringworm	...	...	...	...	2
Meningitis	...	...	...	...	1
Other conditions	...	...	...	...	2
					<u>2,313</u>

School Closures — There was no need to close any school on account of infectious disease during the year.

# 9. Physical Training and Remedial Exercises

The Committee's Chief Organiser of Physical Education, Mr. H. Stott, reports as follows:—

Chief Organiser: Mr. H. Stott. County 4/5 Ipswich 1/5

Assistant Organisers: Miss A. R. Lewis.  
Miss R. B. Ayles. County 7/10 Ipswich 3/10  
Mr. F. W. Newborn. County 4/5 Ipswich 1/5

There was an increase in the number of children reported to be in need of remedial exercises during 1963 but with a certain amount of difficulty, due partly to a reduction in staff, all were seen and advised. It will be appreciated that children referred in this way are often the ones most likely to be absent from school and journeys made, though not in themselves completely wasted, demand repetition. The pressure on time of the organisers is making it increasingly difficult to follow up cases. This is unfortunate but no immediate solution is evident.

	<u>1960</u>	<u>1961</u>	<u>1962</u>	<u>1963</u>
<u>Total number of children concerned:</u>	39	36	76	104

	<u>1960</u>	<u>1961</u>	<u>1962</u>	<u>1963</u>
<u>Summary of conditions:</u>				
Foot conditions ...	26	21	38	25
Spine and Shoulder girdle	13	13	35	75
Miscellaneous ...	1	2	3	4

Distribution:

Grammar ...	1	-	1	39
Modern ...	6	11	14	27
Primary ...	27	26	61	38

	<u>Boys</u>		<u>Girls</u>	
	Under 12	Over 12	Under 12	Over 12
1960	19	4	12	4
1961	10	2	22	2
1962	33	5	29	9
1963	25	12	18	49

GENERAL: Physical Education despite the handicaps of lack of specialist staff, perhaps particularly on the girls' side, continued to make reasonable progress. There was a widening of activities and it has been encouraging to find that more schools are finding it possible to participate in the activities of the East Suffolk Schools' and Young Peoples' Sailing Association which offers good opportunities to those interested in this challenging activity.

Facilities in the Primary Schools improved in some cases but much remains to be done overall. Playing Field and Hard Surface areas are inadequate in so many schools. The volume of large apparatus, however, was stepped up and this more profitable use of limited space compensated in some measure for the lack of larger areas.

Swimming opportunities again increased and the future is most promising. Primary Schools found the Portable Pools manageable and worthwhile with children learning to swim at a much greater rate than was ever possible in the weekly visits to local baths. Although the provision of Teaching Baths at Secondary Schools continued with major school extensions there still remain those schools where no building works are likely in the near-future and where no Bath is contemplated.

Overall the year was satisfactory and the County participated with success in many inter county and national events.

#### 10. School Meals

The Chief Education Officer has kindly supplied the following information relating to the work of the School Meals Service during the year:—



During the year 1963 the average number of children taking meals has been in the region of 17,100 per day or 71% of the school population, compared with an average of about 15,900 per day and 66.6% in 1962. Over the years the number of children taking meals has increased considerably and the percentage of the school population taking meals has also increased steadily.

It is the aim to provide a kitchen at every school so that meals will be cooked on the premises. It will be many years before every school has its own kitchen but during 1963 new kitchen premises have been provided as follows:-

(1) Holbrook Modern School

Meals were previously provided for this school from the Holbrook C.P. School. A new kitchen has now been provided in the enlarged Modern School and the kitchen at Holbrook C.P. School has been closed temporarily but will be improved and adapted during 1964. Meals for the Primary School are served from the Modern School until the adaptations to the old Primary School kitchen are completed.

(2) Laxfield V.A.P. School

A new kitchen was provided in the new school.

(3) Bacton Modern School

Meals were previously provided for this school from the Stowmarket Central Kitchen. A new kitchen was provided in the newly erected Modern School and the kitchen here also provides meals for Bacton C.P. School.

(4) Saxmundham C.P. School

Meals were previously provided for this school from the Kelsale C.P. School. The former craft room has been converted into a kitchen / dining room.

(5) Stowupland C.P. School

Meals were previously provided for this school from the Stowmarket Central Kitchen. A new kitchen was provided here in the enlarged school.

At the end of the Autumn Term 1963 the Stowmarket Central Kitchen was closed. Combs Ford, Combs C.P. and Great Finborough are now served from Chilton Primary School whilst Wetherden, Onehouse, Old Newton and the Training Centre are now served from Stowmarket Modern School.

The kitchen at Pettaugh was closed in November and the school itself will be closed at Easter 1964. Meals for Gosbeck, Coddensham and temporarily for Pettaugh until it closes, are now provided from the kitchen at Witnesham School.



Improvements to ventilation, flooring and general amenities in a number of kitchens and sculleries have continued to be made.

The experiment, started in 1962, aimed at promoting the eating of apples after the school meal as a preventative of dental decay, has been continued and extended during 1963. Last year about 60 schools were included in the Scheme, but during 1963 the provision of apples was extended to a very much larger number of schools — only 29 schools not being supplied. It is felt that this experiment has proved very successful and has been welcomed by the majority of Heads.

The provision of "Meals on Wheels" for old people in the Halesworth area has been undertaken as a temporary measure until the Welfare Service can provide their own kitchen. These meals are at present supplied from Halesworth Modern School.

#### 11. Provision of Milk for School Children

This report deals only with the supply of milk to school children under the Milk in Schools Scheme whereby each child receives a free allowance of  $\frac{1}{3}$  pint daily. In the County (excluding the Borough of Lowestoft) milk is supplied to 198 maintained and 34 non-maintained schools.

##### 1. Popularity of the Scheme

Maintained Schools — 23,722 children in attendance in September, 17,204 that is 72.52% were receiving milk.

Non-Maintained Schools — 3,843 children in attendance in September, 3,461 that is 90.05% were receiving milk.

##### 2. Delivery

With one exception all schools received milk in  $\frac{1}{3}$  pint bottles. In the other case the milk is received from the adjoining farm, owned by the Governing Body of the school.

The pasteurised milk was delivered by 40 dairymen, received by them pasteurised and bottled from 16 licensed sources. In 2 cases schools receive a supply of raw milk direct from the Producers.

##### 3. Quality of Milk

All sources of school milk must be approved by the County Medical Officer of Health, and wherever possible supplies must be Pasteurised or Tuberculin Tested. At the end of 1963, 2 schools, Gosbeck and Southwold St. Felix, were receiving a Tuberculin Tested supply; the remainder received Pasteurised milk.

##### 4. Supervision of Supplies

6 of the 16 sources of pasteurised milk are situated within the County; in these cases supervision was maintained by inspection of

dairies, plant, bottles, etc. In all other cases a close liaison is maintained with officers of the appropriate Food and Drugs Authorities for this purpose.

Samples of milk were taken and examined for the following purposes:

(i) Biological

All raw milk supplies were sampled regularly and submitted for biological examination. The 2 herds concerned were sampled on 7 occasions, involving 29 samples, all of which proved satisfactory.

(ii) Keeping Quality and Efficiency of Pasteurisation

52 samples were taken for this purpose. All satisfied the Phosphatase Test for efficient pasteurisation. 1 sample failed the Methylene Blue Test for keeping quality. This failure occurred in milk pasteurised and bottled outside the County, and the officers of the Food and Drugs Authority concerned were notified.

(iii) Chemical Quality

49 samples were examined for this purpose. All results were satisfactory.

12. Co-operation with Voluntary Bodies

National Society for the Prevention of Cruelty to Children.

As in past years, the Officers of the Society have been readily available to give help and advice in any case brought to their notice.

13. Handicapped Pupils — The Handicapped Pupils and Special Schools Regulations, 1959, detail ten categories of defects which require special educational treatment, and the following statistics indicate the progress that has been made in ascertaining and dealing with children who come within the scope of the Regulations. More detailed statistical information will be found in the Tables at the end of this Report.

Educationally Subnormal — The following table shows the number of educationally subnormal children at present ascertained in the County, 69 of whom are in residential Special Schools.

EDUCATIONALLY SUBNORMAL PUPILS					
No. on Register at end of year  Recommended —  Special School      Special Class		No. of children ascertained during year			
		Requiring treatment in a Special School		Requiring special class at ordinary School	TOTAL
		Res.	Day		
117	51	23	3	26	52

Unsuitable for education in the ordinary school

During the year 15 children were found to be unsuitable for education in the ordinary schools and notified to the Local Health Authority in accordance with Section 57(4) of the Education Act, 1944, as amended.

Other Defects —	Total ascertained	At Special School
Blind Pupils ... ..	3	3
Partially Sighted Pupils ... ..	8	6
Deaf Pupils ... ..	15	15
Partially Hearing Pupils ... ..	5	3
Delicate Pupils ... ..	12	3
Epileptic Pupils ... ..	2	2
Maladjusted Pupils ... ..	35	13
Physically Handicapped Pupils ... ..	20	12
Pupils suffering from Speech Defects ... ..	-	-

Multiple Defects:-

Educationally Subnormal and Physically Handicapped ... ..	2	-
Physically Handicapped and Speech Defect ... ..	1	1
Educationally Subnormal and Maladjusted ... ..	3	3
Epileptic and Educationally Subnormal ... ..	1	1
Maladjusted and Educationally Subnormal ... ..	1	1
Educationally Subnormal and Partially Sighted ... ..	1	1
Physically Handicapped and Educationally Subnormal ... ..	1	-
Partially Hearing, Educationally Subnormal and Physically Handicapped ... ..	1	1
Educationally Subnormal and Epileptic ... ..	1	-
Delicate and Maladjusted ... ..	1	1

14. Full Time Courses of Technical Training for Handicapped Children

One physically handicapped boy was aided by the Education Committee to attend a short pre-vocational course at the Queen Elizabeth's Training College for the Disabled at Leatherhead.

There were no other handicapped pupils awaiting training during the year.

15. Nursery Schools

There are at present no Nursery Schools in the County.

16. Employment of Children

Under the County Council's bye-laws regulating the employment of children, 552 pupils were medically examined and found fit to be employed in various specified occupations.

17. Medical examinations of Boarded Out Children — 184

18. Student Teacher and Teacher medical examinations — 115

MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED AND ASSISTED PRIMARY  
AND SECONDARY SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS)

## PERIODIC MEDICAL INSPECTIONS

Age Groups Inspected (By years of birth)	No. of Pupils Inspected	Physical Condition of Pupils Inspected			PUPILS FOUND TO REQUIRE TREATMENT AT PERIODIC MEDICAL INSPECTIONS (excluding Dental Diseases and Infestation with Vermin)		
		Satisfactory		Unsatisfactory	For defective vision (excluding squint)	For any other conditions	Total individual pupils
		No.	%				
1959 - and later	--	--	--	--	--	--	--
1958 ...	925	923	99.78	2	25	49	66
1957 ...	1,339	1,337	99.85	2	29	80	97
1956 ...	197	197	100	--	9	14	22
1955 ...	72	72	100	--	5	5	9
1954 ...	49	49	100	--	4	4	7
1953 ...	2,027	2,026	99.95	1	162	66	230
1952 ...	218	218	100	--	18	11	26
1951 ...	123	119	96.75	4	18	7	23
1950 ...	53	53	100	--	7	2	8
1949 ...	1,817	1,817	100	--	315	108	333
1948 - and earlier	206	206	100	--	40	14	52
TOTAL ...	7,026	7,017	99.87	9	632	360	873



## OTHER MEDICAL INSPECTIONS

A special inspection is one carried out at the special request of a parent, doctor, nurse, teacher or other person. A re-inspection is an inspection arising out of one of the periodic medical inspections or out of a special inspection.

Number of Special Inspections	69
Number of re-inspections	<u>4,339</u>
Total	<u>4,408</u>

## INFESTATION WITH VERMIN

- (a) Total number of individual examinations  
of pupils in schools ... 3,579
- (b) Total number of individual pupils found  
to be infested ... 24
- (c) Number of individual pupils in respect  
of whom cleansing notices were issued  
(Section 54(2), Education Act. 1944) —
- (d) Number of individual pupils in respect  
of whom cleansing orders were issued  
(Section 54(3), Education Act, 1944) —

# DEFECTS FOUND BY MEDICAL INSPECTION DURING THE YEAR

NOTE -- All defects noted are included, whether or not under treatment or observation at the time of the inspection. The tables include separately the number of pupils found to require treatment (T) and observation (O).

## PERIODIC AND SPECIAL INSPECTIONS

Defect or Disease		PERIODIC				Special
		Entrants	Leavers	Others	Total	
Skin ... ..	T	4	16	8	28	-
	O	22	12	16	50	8
Eyes —	T	54	355	223	632	7
(a) Vision ...	O	498	126	174	798	5
(b) Squint ...	T	18	4	9	31	-
	O	11	2	6	19	-
(c) Other ...	T	1	-	5	6	-
	O	4	6	7	17	-
Ears —	T	11	10	10	31	1
(a) Hearing ...	O	26	8	20	54	-
(b) Otitis Media	T	3	2	-	5	-
	O	37	5	26	68	-
(c) Other ...	T	2	2	-	4	1
	O	5	-	3	8	1
Nose and Throat	T	21	10	14	45	1
	O	88	8	30	126	6
Speech ...	T	16	5	16	37	1
	O	61	6	14	81	1
Lymphatic Glands	T	-	1	2	3	-
	O	33	3	14	50	-
Heart ... ..	T	8	8	2	18	1
	O	31	6	13	50	-
Lungs ... ..	T	8	5	6	19	-
	O	65	11	21	97	2
Developmental —	T	1	-	10	11	-
(a) Hernia ...	O	6	-	7	13	-
(b) Other ...	T	3	1	8	12	-
	O	23	4	45	72	1
Orthopaedic —	T	3	23	8	34	1
(a) Posture ...	O	5	8	6	19	-
(b) Feet ...	T	7	3	4	14	-
	O	25	3	11	39	-
(c) Other ...	T	7	17	-	24	-
	O	18	10	10	38	-
Nervous System —	T	-	3	2	5	-
(a) Epilepsy ...	O	3	2	2	7	1
(b) Other ...	T	-	-	-	-	1
	O	3	5	6	14	-
Psychological —	T	1	2	2	5	2
(a) Development	O	23	5	17	45	1
(b) Stability ...	T	2	2	1	5	2
	O	13	3	9	25	-

Defect or Disease		PERIODIC				Special
		Entrants	Leavers	Others	Total	
Abdomen ...	T	4	-	-	4	1
	O	1	1	1	3	-
Other ...	T	9	8	2	19	2
	O	13	9	2	24	5

TREATMENT OF PUPILS ATTENDING MAINTAINED AND ASSISTED PRIMARY AND SECONDARY SCHOOLS

EYE DISEASES, DEFECTIVE VISION AND SQUINT

	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint ...	-
Errors of refraction (including squint)	73
Total ...	73
Number of pupils for whom spectacles were prescribed ...	65

DISEASES AND DEFECTS OF EAR, NOSE & THROAT

	Number of cases known to have been dealt with
Received operative treatment —	
(a) for diseases of the ear ...	8
(b) for adenoids and chronic tonsillitis ...	395
(c) for other nose and throat conditions ...	4
Received other forms of treatment	8
Total ...	415
Total Number of pupils in schools who are known to have been provided with hearing aids —	
(a) in 1963 ...	7
(b) in previous years ...	21

# ORTHOPAEDIC AND POSTURAL DEFECTS

	Number of cases known to have been treated
(a) Pupils treated at clinics or out-patients' departments ...	3
(b) Pupils treated at school for postural defects ...	104
Total ...	107

# DISEASES OF THE SKIN (excluding uncleanness)

	Number of cases known to have been treated
Ringworm — (i) Scalp ...	1
(ii) Body ...	1
Scabies ...	—
Impetigo ...	15
Other skin diseases ...	5
Total ...	22

# CHILD GUIDANCE TREATMENT

	Number of cases known to have been treated
Pupils treated at Child Guidance Clinics ...	183

# SPEECH THERAPY

	Number of cases known to have been treated
Pupils treated by speech therapists	551

# OTHER TREATMENT GIVEN

	Number of cases known to have been dealt with
(a) Pupils with minor ailments	—
(b) Pupils who received convalescent treatment under School Health Service arrangements ...	—
(c) Pupils who received B.C.G. vaccination ...	968
(d) Other than (a), (b) and (c) above Please specify:	
Undescended Testicles ...	5
Enuresis ...	1
Unstable gait ...	1
Mastitis ...	1
Anaemia ...	1
	977

DENTAL INSPECTION AND TREATMENT CARRIED OUT  
BY THE AUTHORITY

				<u>No. of Pupils</u>	<u>Totals</u>
Pupils Inspected:	At Periodic Inspections			17,487	
	As Specials	...	...	577	18,064
Requiring treatment	...	...	...	8,763	
Offered treatment	...	...	...	8,763	
Actually treated	...	...	...	4,935	
Attendances made for treatment, excluding orthodontics		...	...	8,438	
				<u>Number</u>	
Half days devoted to Periodic (School) Inspection				210	
	Treatment			1,871	2,081
Fillings:	Permanent Teeth	...	...	6,003	
	Temporary Teeth	...	...	1,176	7,179
Teeth filled:	Permanent Teeth	...	...	5,484	
	Temporary Teeth	...	...	1,115	6,599
Extractions:	Permanent Teeth	...	...	685	
	Temporary Teeth	...	...	3,282	3,967
Administration of general anaesthetics for extraction	...	...	...	22	
Half days devoted to general anaesthetics by:					
	1. Dentists	...	...		4
	2. Medical Practitioners	...	...		4
Pupils supplied with artificial teeth		...			32
Other operations	...	...	...		2,566
Orthodontics:					
(a)	Attendance for treatment	...			468
(b)	Half days devoted to treatment	...			50
(c)	Cases commenced in the year	...			45
(d)	Cases brought forward from previous year	...	...		46
(e)	Cases completed in the year	...			23
(f)	Cases discontinued in the year	...			4
(g)	Pupils treated with appliances	...			85
(h)	Removable appliances fitted	...			39
(i)	Fixed appliances fitted	...	...		-



HANDICAPPED PUPILS REQUIRING EDUCATION AT SPECIAL  
SCHOOLS APPROVED UNDER SECTION 9(5) OF THE EDUCATION  
ACT 1944 OR BOARDING IN BOARDING HOMES

During the calendar year ended 31st December 1963	*(1) (2)		(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
A. Handicapped pupils newly assessed.	-	1	-	2	4	3	10	32	1	1	54
B. (i) Children included at A, newly placed in special schools (other than hospital special schools) or boarding homes	-	-	-	2	2	2	1	9	1	-	17
(ii) children assessed prior to 1st January, 1963, and newly placed in special schools (other than hospital special schools) or boarding homes	-	-	1	-	1	3	1	7	-	-	13
TOTAL	-	-	1	2	3	5	2	16	1	-	30

On or about 23rd January 1964, handicapped pupils

C. (i) requiring places in special schools											
(a) day ... ..	-	-	-	-	-	-	-	5	-	-	5
(b) boarding ...	-	2	-	-	6	2	12	46	-	1	69
(ii) included at (i) had not reached the age of 5 and were awaiting -											
(a) day places ...	-	-	-	-	-	-	-	-	-	-	-
(b) boarding places	-	-	-	-	-	-	-	-	-	-	-
(iii) included at (i) who had reached the age of 5 but whose parents had refused consent to admission to a special school, were awaiting											
(a) day places ...	-	-	-	-	-	-	-	-	-	-	-
(b) boarding places	-	-	-	-	2	1	6	21	-	1	31

\*CATEGORY

- |                           |                    |             |
|---------------------------|--------------------|-------------|
| 1. Blind                  | 6. Delicate        | 11. TOTAL   |
| 2. Partially Sighted      | 7. Maladjusted     | Cols. 1-10. |
| 3. Deaf                   | 8. E.S.N.          |             |
| 4. Partial Hearing        | 9. Epileptic       |             |
| 5. Physically Handicapped | 10. Speech Defects |             |

Handicapped pupils requiring education at special schools approved under Section 9(5) of the Education Act 1944 or boarding in boarding Homes (cont'd)

During the calendar year ended 31st December 1963	*(1) (2)		(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
D. (i) on the registers of:											
(1) maintained special schools as:											
(a) day pupils ...	-	-	-	-	-	-	-	9	-	-	9
(b) boarding pupils ...	-	7	14	2	2	3	8	50	-	-	86
(2) non-maintained special schools as											
(a) day pupils ...	-	-	-	-	-	-	-	-	-	-	-
(b) boarding pupils ...	3	1	1	2	9	-	4	17	3	-	40
TOTAL ...	3	8	15	4	11	3	12	76	3	-	135
(ii) were on the registers of independent schools under arrangements made by the Authority ...	-	-	-	-	-	-	1	-	-	-	1
TOTAL (D(i) and D(ii))	3	8	15	4	11	3	13	76	3	-	136
(iii) were boarded in homes and not under (i) and (ii) above ...	-	-	-	-	-	-	-	-	-	-	-
TOTAL (D(i), (ii) and (iii))	3	8	15	4	11	3	13	76	3	-	136
E. On or about 23rd January, 1964, handicapped pupils (irrespective of the areas to which they belong) educated under arrangements made by the Authority in accordance with Section 56 of the Education Act, 1944.											
(i) in hospitals ...	-	-	-	-	1	-	-	-	-	-	1
(ii) in other groups ...	-	-	-	-	-	-	-	-	-	-	-
(iii) at home ...	-	-	-	-	-	-	1	-	-	-	1

\*CATEGORY

- |                           |                    |             |
|---------------------------|--------------------|-------------|
| 1. Blind                  | 6. Delicate        |             |
| 2. Partially Sighted      | 7. Maladjusted     |             |
| 3. Deaf                   | 8. E.S.N.          | 11. TOTAL   |
| 4. Partial Hearing        | 9. Epileptic       | Cols. 1-10. |
| 5. Physically Handicapped | 10. Speech Defects |             |

BOROUGH OF LOWESTOFT  
(EXCEPTED DISTRICT)

The following report on the work of the School Health Service in 1963 has been prepared by Dr.A.C. Gee, School Medical Officer in Lowestoft.

There have been two alterations in staff: Mrs.Walker, Health Visitor, joining in July and Miss Cosnett, Health Visitor leaving in November.

During the year, in accordance with the Ministry's recommendations, the new system of reviewing pupils at age eleven was initiated. All pupils are required to have a proforma completed and subsequent examination is carried out on those likely to have some defect. Provision is also made whereby examination is carried out at the particular request of the parent. The system appears to work very well, but it will be a few years before sufficient statistical evidence can be obtained in order to place the correct value on it. The number of sessions subsequently saved have been utilised to make more frequent review examinations.

Immunisations, using the combined antigens against the diseases Diphtheria and Tetanus, has been maintained at a level in keeping with the rest of the country. This can also be said of oral immunisation against Poliomyelitis.

There has been yet a further increase in the number of cases listed as "unsatisfactory". This has resulted from a more rigid interpretation and application of the Ministry's definition of "unsatisfactory". It now covers many defects of a very minor nature solely because the parents are not prepared to take the trouble to have them put right. The increase does not mean that the general level of health of the school children in Lowestoft is in any way lower than in previous years.

The number of cases and types of cases requiring observation or treatment followed much the same pattern as in the previous year, with a slightly lower incidence in the number of skin conditions and feet defects. This lower incidence in number of skin conditions was also found in the "Special Inspection" category.

The number of children found to be infested with vermin remains relatively high at 23: this, despite valiant efforts on the part of the school nurses in carrying out class inspections whenever a case is reported.

The Child Guidance Unit at Regent Road Clinic, formerly operated by the Consultant Child Psychiatrist from Ipswich, is now functioning under the Consultant from Norwich. Attendances at this clinic have increased from 71 to 119. After careful investigation, I am of the opinion that this increase is due solely to many of the cases being of a minor or temporary nature, and that the incidence of maladjustment in general is not greatly altered from the previous year.

Mentally handicapped children attending special schools, either as day or boarding pupils, have increased in number from 20 to 15. It must be emphasised there has been no decrease in the numbers waiting for admission to special schools.

I have appreciated the support and encouragement which I have received from the Chairman and members of the School Welfare Sub-Committee. Grateful thanks are also due to the members of my staff, and also to all the school headteachers for their tolerance and help throughout the year



1. STAFF

Borough School Medical Officer:

A.C.Gee, M.R.C.S., L.R.C.P., D.P.H.

Deputy School Medical Officer:

A.S. Lindsay, M.B., Ch.B., D.P.H.

School Medical Officers:

None.

The aggregate of time given to School Health Service work is equivalent to the services of 0.76 of a full-time Officer.

Speech Therapist:

Miss J. Bassett, L.C.S.T.

Principal School Dental Officer:

C.D. Macpherson, L.D.S., R.C.S.

School Dental Officers:

Mrs. H.A. Bell, L.D.S., R.C.S.

D.L. Rivett, L.D.S., R.C.S.

County Nursing Officer:

Miss M. Vaughan-Jones, S.R.N., S.C.M., H.V. Cert.

Area Nursing Officer:

Miss H. Place, S.R.N., S.C.M., H.V. Cert.

School Nurses:

Miss J.P. Cosnett (to 30.11.63)

Mrs. M.E. Mills (1.1.63)

Miss E.A.M. Pretty

Miss A. Taylor

Mrs. J. Walker (17.7.63)

The aggregate of time given to School Health Service work is equivalent to the services of 1.0 full time School Nurses.

Dental Attendants:

Miss D. Rudd

Mrs. M. Mathew

Clinic Nurses:

Mrs. P.K.M. Rose

Mrs. G.M. Sampson

MINISTRY OF EDUCATION

MEDICAL INSPECTION AND TREATMENT

RETURN FOR THE YEAR ENDED 31st DECEMBER, 1963

LOCAL EDUCATION AUTHORITY —  
EAST SUFFOLK (LOWESTOFT EXCEPTED DISTRICT)

Number of Pupils on registers of maintained  
primary and secondary schools (including  
nursery and special schools) in January 1964 ... 6,912

PART 1 — MEDICAL INSPECTIONS OF PUPILS ATTENDING MAIN-  
TAINED PRIMARY AND SECONDARY SCHOOLS (INCLUDING  
NURSERY AND SPECIAL SCHOOLS).

TABLE A — PERIODIC MEDICAL INSPECTIONS

Age groups inspect- ed (by year of birth)	No. of Pupils inspect- ed	PHYSICAL CONDITION OF PUPILS				Pupils found to require treatment (excluding dental diseases and infestation with vermin).		
		Satisfactory		Un- satisfactory		For defective vision (excluding squint)	Any other condition recorded Part II	TOTAL Indivi- dual pupils
		No.	% of Col. 2	No.	% of Col. 2			
1959 and later	-	-	-	-	-	-	-	-
1958	283	272	96.1	11	3.9	6	69	70
1957	90	85	94.4	5	5.5	5	23	26
1956	13	11	84.6	2	15.4	-	1	1
1955	5	5	100	-	-	-	1	1
1954	9	8	88.8	1	11.1	1	3	4
1953	7	6	85.7	1	14.3	-	1	1
1952	91	80	87.9	11	12.1	36	45	71
1951	42	35	83.3	7	16.6	6	18	23
1950	8	8	100	-	-	2	3	4
1949	58	58	100	-	-	2	5	6
1948 and earlier	74	73	99.4	3	.4	105	136	210
TOTAL	1,340	1,299	96.9	41	3.1	163	305	417

TABLE B — OTHER INSPECTIONS

Number of special inspections	...	194
Number of re-inspections	...	<u>1,029</u>
TOTAL	...	<u>1,223</u>

A special inspection is one that is carried out at the special request of a parent, doctor, nurse, teacher or other person.

A re-inspection is an inspection arising out of one of the periodic medical inspections or out of a special inspection.

TABLE C — INFESTATION WITH VERMIN

(a)	Total number of individual examinations of pupils in schools by school nurses or other authorised persons	...	1,522
(b)	Total number of individual pupils found to be infested		23
(c)	Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act 1944)	...	NIL
(d)	Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act 1944)	...	NIL

TABLE D — SCREENING TESTS OF VISION AND HEARING

1. (a) Is the vision of entrants tested? - Yes.
- (b) If so, how soon after entry is this done? - 1-3 months, at first medical examination.
2. How frequently is vision testing repeated throughout a child's school life? - Every two years.
3. Is colour vision testing undertaken? - No.
4. By whom is vision testing carried out? - School Nurses.
5. Is audiometric testing of entrants carried out? - No.

RETURN FOR THE YEAR ENDED 31st DECEMBER 1963

LOCAL EDUCATION AUTHORITY —  
EAST SUFFOLK LOWESTOFT EXCEPTED DISTRICT

PART II — DEFECTS FOUND BY MEDICAL INSPECTION  
DURING THE YEAR

TABLE A — PERIODIC INSPECTIONS

This Table includes separately the number of pupils found to require treatment (T) and the number of pupils found to require observation (O).

Defect Code No. (1)	Defect or Disease (2)	PERIODIC INSPECTIONS			
		Entrants	Leavers	Others	Total
4	Skin ... .. T	6	47	6	59
		2	-	2	4
5	Eyes — T	11	106	43	160
		51	22	4	77
	(a) Vision ... O	3	3	3	9
		1	-	3	4
	(b) Squint ... T	3	3	5	11
		2	-	-	2
6	Ears — T	1	3	1	5
		11	4	4	19
	(a) Hearing ... O	4	4	3	11
		6	-	2	8
	(b) Otitis Media ... T	11	9	2	22
		1	-	2	3
7	Nose and Throat ... T	30	10	7	47
		24	1	8	33
8	Speech ... .. T	1	5	5	11
		9	2	3	14
9	Lymphatic Glands ... T	-	-	-	-
		3	-	1	4
10	Heart ... .. T	1	5	4	10
		3	1	5	9
11	Lungs ... .. T	10	10	10	30
		9	2	3	14
12	Developmental — T	2	-	1	3
		2	-	-	2
	(a) Hernia ... O	-	5	3	8
		2	-	-	2
13	Orthopaedic — T	2	7	3	12
		3	1	2	6
	(a) Posture ... T	9	3	4	16
		3	-	2	5
	(b) Feet ... .. T	8	27	18	53
		5	2	-	7



Table A -- Periodic Inspection (cont'd)

Defect Code No. (1)	Defect or Disease (2)	PERIODIC INSPECTIONS			
		Entrants	Leavers	Others	Total
14	Nervous System -- T	1	-	1	2
	(a) Epilepsy ... O	1	-	-	1
	(b) Other ... T	-	-	3	3
	... O	2	-	1	3
15	Psychological -- T	-	1	3	4
	(a) Development ... O	11	-	5	16
	(b) Stability ... T	-	4	7	11
	... O	12	-	11	23
16	Abdomen ... T	-	-	2	2
	... O	-	-	-	-
17	Other ... T	3	1	-	4
	... O	2	-	-	2

TABLE B -- SPECIAL INSPECTIONS

Note:- All defects, including defects of pupils at Nursery and Special Schools, noted at special medical inspections should be included in this Table, whether or not they were under treatment or observation at the time of the inspection.

Defect Code No. (1)	Defect or Disease (2)	SPECIAL INSPECTIONS	
		Pupils requiring treatment (3)	Pupils requiring observation (4)
4	Skin ... ..	166	1
5	Eyes --		
	(a) Vision ... ..	18	-
	(b) Squint ... ..	-	-
	(c) Other ... ..	-	-
6	Ears --		
	(a) Hearing ... ..	2	1
	(b) Otitis Media ... ..	-	-
	(c) Other ... ..	2	-
7	Nose and Throat ... ..	7	2
8	Speech ... ..	-	-
9	Lymphatic Glands ... ..	-	-
10	Heart ... ..	-	-
11	Lungs ... ..	-	-
12	Developmental --		
	(a) Hernia ... ..	-	-
	(b) Other ... ..	2	-

Table B — Special Inspections (cont'd)

Defect Code No.  (1)	Defect or Disease  (2)	SPECIAL INSPECTIONS	
		Pupils requiring treatment (3)	Pupils requiring observation (4)
13	Othopaedic —		
	(a) Posture ... ..	-	-
	(b) Feet ... ..	4	-
	(c) Other ... ..	1	1
14	Nervous System —		
	(a) Epilepsy ... ..	-	-
	(b) Other ... ..	-	-
15	Psychological --		
	(a) Development ... ..	19	2
	(b) Stability ... ..	11	6
16	Abdomen ... ..	6	-
17	Other ... ..	9	-

Form 8 M (iii)

MINISTRY OF EDUCATION

MEDICAL INSPECTION AND TREATMENT

RETURN FOR THE YEAR ENDED 31st DECEMBER 1963

LOCAL EDUCATION AUTHORITY —  
EAST SUFFOLK LOWESTOFT EXCEPTED DISTRICT

PART III -- TREATMENT OF PUPILS ATTENDING MAINTAINED  
PRIMARY AND SECONDARY SCHOOLS (INCLUDING  
NURSERY AND SPECIAL SCHOOLS).

TABLE A — EYE DISEASES, DEFECTIVE VISION AND SQUINT

	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint ... ..	18
Errors of refraction (including squint)	351
Total ...	369
Number of pupils for whom spectacles were prescribed ... ..	264

TABLE B — DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	Number of cases known to have been dealt with
Received operative treatment —	
(a) for diseases of the ear . . .	1
(b) for adenoids and chronic tonsilitis	143
(c) for other nose and throat conditions	8
Received other forms of treatment	-
<div style="text-align: right;">Total . . .</div>	152
Total number of pupils in schools who are known to have been provided with hearing aids —	
(a) in 1963 . . . . .	-
(b) in previous years . . .	3

TABLE C -- ORTHOPAEDIC AND POSTURAL DEFECTS

	Number of cases known to have been treated
(a) Pupils treated at clinics or out-patients department . . .	35
(b) Pupils treated at school for postural defects . . . . .	-
Total . . .	35

TABLE D — DISEASES OF THE SKIN  
(excluding uncleanness, for which see Table C of Part 1)

				Number of cases known to have been treated.
Ringworm —	(a) Scalp	...	...	-
	(b) Body	...	...	-
Scabies	...	...	...	-
Impetigo	...	...	...	4
Other skin diseases	...	...	...	165
	Total	...	...	169

TABLE E — CHILD GUIDANCE TREATMENT

	Number of cases known to have been treated.
Pupils treated at Child Guidance Clinic	119

TABLE F — SPEECH THERAPY

	Number of cases known to have been treated
Pupils treated by speech therapists	74

TABLE G — OTHER TREATMENT GIVEN

	Number of cases known to have been treated
(a) Pupils with minor ailments ...	62
(b) Pupils who received convalescent treatment under School Health Service arrangements ...	-
(c) Pupils who received B.C.G. Vaccination ...	370

# DENTAL INSPECTION AND TREATMENT

(a)	Dental and Orthodontic work				
1.	Number of pupils inspected				
	(a) At periodic inspections	...	2,507)	Total (I)	2,903
	(b) As specials	...	396)		
II.	Number found to require treatment				1,700
III.	Number offered treatment				1,700
IV.	Number actually treated				2,510

## (b) Dental work (other than Orthodontics (Note: figures relating to Orthodontics not included in Section (b))).

I.	Number of attendances made by pupils excluding those recorded at (c) I below:				5,895
II.	Half days devoted to:				
	(a) Periodic (School) Inspections	...	44)	Total (II)	1,014
	(b) Treatment	...	970)		
III.	Fillings:				
	(a) Permanent Teeth	...	2,485)	Total (III)	4,771
	(b) Temporary Teeth	...	2,286)		
IV.	Number of Teeth filled:				
	(a) Permanent Teeth	...	2,171)	Total (IV)	4,150
	(b) Temporary Teeth	...	1,979)		
V.	Extractions:				
	(a) Permanent Teeth	...	242)	Total (V)	846
	(b) Temporary Teeth	...	604)		
VI.	(a) Number of general anaesthetics given for extractions	...			413
	(b) Number of half days devoted to administration of general anaesthetics by:				
	Dentist	...	-)	Total (VI)	43
	Medical Practitioners	...	43)		
VII.	Number of pupils supplied with artificial teeth				1
VIII.	Other operations:				
	Crowns	...	8)		
	Inlays	...	1)	Total (VIII)	1,679
	Other treatment		1,670)		

## (c) Orthodontics

I.	Number of attendances made by pupils for treatment				195
II.	Half days devoted to treatment	...	...		-
III.	Cases commenced during the year	...	...		38
IV.	Cases brought forward from previous years	...			1
V.	Cases completed during the year	...	...		13
VI.	Cases discontinued during the year	...	...		-
VII.	Number of removable appliances fitted	...	...		25
VIII.	Number of pupils treated by means of appliances				83
IX.	Cases referred to and treated by Hospital Orthodontist				-



HANDICAPPED PUPILS REQUIRING EDUCATION AT SPECIAL SCHOOLS  
APPROVED UNDER SECTION 9(5) OF THE EDUCATION ACT 1944 OR  
BOARDING IN BOARDING HOMES

During the calendar year ended* 31st December, 1963	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
A. How many handicapped pupils were newly assessed as needing special educational treatment at special schools or in boarding homes?	-	-	-	-	-	-	3	5	-	-	8
B. (i) of the children included at A, how many were newly placed in special schools (other than hospital special schools) or boarding homes?	-	-	-	-	-	-	1	-	-	-	1
(ii) of the children assessed prior to 1st January, 1963, how many were placed in special schools (other than hospital special schools) or boarding homes?	-	-	-	-	-	-	2	2	-	-	4
TOTAL (B(i) and B(ii))	-	-	-	-	-	-	6	7	-	-	13
C. On or about 20th January, 1964, how many handicapped pupils from the Authority's area —											
(i) were requiring places in special schools —											
(a) day ...	-	-	-	-	-	-	-	9	-	-	9
(b) boarding ...	-	-	-	-	-	-	2	2	-	-	4
(ii) included at (i) who had not reached the age of 5 and were waiting —											
(a) day places ...	-	-	-	-	-	-	-	-	-	-	-
(b) boarding places	-	-	-	-	-	-	-	-	-	-	-
(iii) included at (i) who had reached the age of 5, but whose parents had refused consent to their admission to a special school, were waiting —											
(a) day places ...	-	-	-	-	-	-	-	-	-	-	-
(b) boarding places	-	-	-	-	-	-	-	1	-	-	1

Handicapped pupils requiring education at special schools approved under Section 9(5) of the Education Act 1944 or boarding in boarding Homes.

During the calendar year ended* 31st December, 1963	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
D. (i) were on registers of (a) maintained special schools as —											
(a) day pupils ...	-	-	-	-	-	-	-	9	-	-	9
(b) boarding ... *	1	2	-	-	-	-	2	3	-	-	8
(ii) non-maintained special schools as —											
(a) day pupils ...	-	-	-	-	-	-	-	-	-	-	-
(b) boarding ...	-	-	-	1	1	-	3	3	-	-	8
TOTAL ...	1	2	-	1	1	-	5	15	-	-	25
(ii) were on registers of independent schools under arrangements made by the Authority ...	-	-	-	-	1	-	1	-	-	-	2
TOTAL (D(i) and D(ii))	1	2	-	1	2	-	6	15	-	-	27
(iii) were boarded in homes and not already included under (i) and (ii) above ...	-	-	-	-	-	-	-	-	-	-	-
TOTAL (D(i), (ii) and (iii)).	1	2	-	1	2	-	6	15	-	-	27
E. On or about 20th January, 1964, how many handicapped pupils, (irrespective of the area to which they belong) were being educated under arrangements made by the Authority in accordance with Section 56 of the Education Act, 1944											
(i) in hospitals ...	-	-	-	-	-	-	-	-	-	-	-
(ii) in other groups (spastics, convalescent homes) ...	-	-	-	-	-	-	-	-	-	-	-
(iii) at home ...	-	-	-	-	-	-	1	-	-	-	1

CHILDREN FOUND UNSUITABLE FOR EDUCATION AT SCHOOL

During the calendar year ended 31st December, 1963:

(i) how many children were the subject of new decisions recorded under section 57(4) of the Education Act 1944? ... 3

Children found unsuitable for Education at School  
(Continued)

(ii) how many reviews were carried out under the provisions of  
Section 57A of the Education Act, 1944? ... Nil

(iii) how many decisions were cancelled under Section 57A(2) of  
the Education Act, 1944? ... Nil

\* KEY

- |                           |                   |            |
|---------------------------|-------------------|------------|
| 1. Blind                  | 6. Delicate       |            |
| 2. Partially Sighted      | 7. Maladjusted    | 11. Total  |
| 3. Deaf                   | 8. E.S.N.         | Cols.1-10. |
| 4. Partial Hearing        | 9. Epileptic      |            |
| 5. Physically Handicapped | 10. Speech Defect |            |









